

LANDLORD VERIFICATION

(This form must be completed by the client's landlord or a representative.)

Client Name:	Case Number:

Please provide the tenant's complete residential address:

Street Address:	Apt. No.:	City:	Zip:

1. Date tenant moved in: _____

2. How many people live in the house or apartment? _____

3. List the names of all people who live in the house or apartment. List their employer, if known:

Name of Person	Working?		Employer
	Yes	No	

4. Questions about the rent payment:

Amount of Rent: \$	Tenant's Portion of Rent: \$	Person making payment:
How often paid? ☐ Weekly ☐ Every Two Weeks ☐ Twice a Month ☐ Monthly		
Method of payment? ☐ Cash ☐ Check ☐ Money Order ☐ Other (explain):		
Is the tenant current in paying the rent? ☐ Yes ☐ No If "No," when was the last month rent was paid?		What is the total amount of past due rent? \$

5. Questions about the utilities:

Are all utilities included in rent? ☐ Yes ☐ No

Utilities the Tenant is responsible for paying (check all that apply): ☐ Gas ☐ Electric ☐ Telephone

Utility bills are paid directly to: ☐ Landlord ☐ Utility Company

Landlord or Representative Name (printed):

Signature - Landlord or Representative

Date

Business Address or Residential Address:

Telephone: